## Total Pages

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE UTILITY PATENT APPLICATION TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: JOHN C. STROEBEL TITLE: FULLY INHIBITED DUAL CHAMBER PACING MODE

15992 U.S. P.			CERTIFICATE UNDER 37 CFR §1 documents referred to as enclosed addressed to: Mail Stop Patent Aprex EXPRESS No. EV 325 072 165 University of the control of t	therein are being deposit	ted with the of Patents,	United States Postal	Service, in an envelo	•
S. PTO			Printed Nam	MOLLY CHLEBECK  DE MALLY CAL	Lbeck	<del></del>		U.S. PT 4692
Commiss P.O. Box	sioner for l			Signature	,			30746 10/81
Sir:								
We are	transmitt	ing herewith the att	ached:					
x	Patent .	Application Trans	nittal					
X	Specific							
X	Drawin		ncluding claims and abstra	ct: Spec. <u>41</u> sheets	s; Claims	10 sheets; Abst	ract <u>1</u>	
		Total sheets: 17	⊠ informal					
	Combir	unexecuted copy from prior ap Deletion of Invent CFR 1.63(d)(2) ar Incorporation by F declaration is sup	r(s) - Signed statement att	osure of the prior a	pplication	n, from which a c	copy of the oath	or .
X		Assignment cover Information Disclor PTO Form 1449 Copies of IDS citate Preliminary Amen	pa Invention to Medtronic, Inc sheet sure Statement ions		ne in the	prior application		
IF A CO	NTINUIN	IG APPLICATION:	· <del>·········</del>					
·			☐ Divisional led September 17, 2002, v December 21, 2000, both	which is a continu	ation-in-	part of applicat		ber
		Amend the speci application Seria	ication by inserting before No., filed, reference of the contraction o	re the first line the	senten	ce:This appli	cation is a	of
			olication original claims nal independent claim m				ılating the filinç	j fee.
	$\boxtimes$	The prior applica	tion is assigned of record	d to Medtronic, Inc	<b>:.</b>			
	$\boxtimes$	The Power of Att	orney in the prior applica	· tion is to: Daniel (	G. Chapi	k ·		

	This application claims the benefit of U.S.	. Provisional Application(s) Serial No.(s), filed
X	Address all future correspondence to:	Daniel G. Chapik, Reg. No. 43,424 Telephone: (763) 514-3066 Customer No. 27581

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee		No. of Extra Claims	Rate	Fee
Total Claims	54	20	=	34	x 18	\$612.00
Independent Claims	9	3	=	6	x 86	\$516.00
Multiple Dependent Claims			****	0	+ 290	
Basic Filing Fee						\$770.00
					TOTAL	\$1,898.00

- X Charge Deposit Account No. 13-2546 in the amount of \$1,898.00 for the filing fee.
- The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed. X

Daniel G. Chapik, Reg. No. 43,424 Telephone: (763) 514-3066 Customer No. 27581